

Atty. Docket No. TAK03 P-323

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CERTIFICATE OF MAILING

I hereby certify that this paper, together with all enclosures identified herein, are being deposited with the United States Postal Service as first class mail, addressed to Mail Stop AF, Commissioner for Patents, P. O. Box 1450, Alexandria, Virginia 22313-1450, on the date indicated below.

July 28, 2005
Date

Deborah A. Clark
Deborah A. Clark

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 1651
Examiner : Francisco C. Prats
Appln. No. : 10/018,770
Applicants : Yoshihito Ikeda et al.
Filing Date : December 17, 2001
Confirmation No. : 2012
For : DRUG COMPOSITION CONTAINING A LECITHIN-MODIFIED SUPEROXIDE DISMUTASE

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

NOTICE OF APPEAL FROM THE PRIMARY
EXAMINER TO THE BOARD OF PATENT
APPEALS AND INTERFERENCES

Applicant hereby appeals to the Board from the decision of the Primary Examiner mailed March 29, 2005 finally rejecting claims 1, 4, 6-8, 10-14 and 19.

The item(s) checked below are appropriate:

1. STATUS OF APPLICANT

This application is on behalf of:

☐ other than a small entity
☒ small entity

Verified Statement

☐ attached
☒ previously asserted on December 17, 2001

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2. FEE FOR FILING NOTICE OF APPEAL

Pursuant to 35 USC §41(a)(6) the fee for filing the Notice of Appeal is:

<u> X </u>	small entity	\$250.00
<u> </u>	other than a small entity	\$500.00

Notice of Appeal fee due: \$250.00

3. EXTENSION OF TIME

The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.

If an additional extension of time is required please consider this a petition therefor.

- (b) X An extension for one (1) month has already been secured and the fee paid therefor of \$60 is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request: \$0.00 (\$60.00 previously charged
Deposit Account No 16-2463
on July 27, 2005.)

4. TOTAL FEE DUE

The total fee due is:

Notice of Appeal fee:	<u>\$250.00</u>
Extension fee (if any):	<u>\$ 0.00</u>

Total Fee Due: \$250.00

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5. FEE PAYMENT

X Attached is a check in the sum of \$250.00.

 Charge Account No. 16 2463 the sum of \$
A duplicate of this transmittal is attached.

6. FEE DEFICIENCY

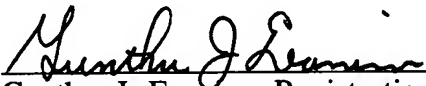
X If any additional extension and/or fee is required charge Account No. 16 2463.

and/or

X If any additional fee for claims is required, charge Account No. 16 2463.

Respectfully submitted,

July 28, 2005
Date



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GJE/dac